## **CLAIMS ONLY**

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL						
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TOTAL DEP.	2	4323		453		<del></del>
TOTAL CLAIMS				10 1		44

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	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL		ža.	<u> </u>	_		_	
TOTAL	<del> </del>	400	<b></b>	444		<b></b>	
DEP.	<u> </u>					Ordon Patrone - Ann	
TOTAL CLAIMS	<u></u>					$\sigma \leqslant \sigma_{i}$	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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